

# Work Order ID 60242

Tuesday, June 29, 2010 12:38:00 PM



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Item ID: D350-727-045

Accept



Setup: Start



Revision ID:

Stop



Item Name: Wearplate, Full Length, LH/RH

Start Date: 6/30/2010 Start Qty: 4.00



Cust Item ID:

Required Date: 7/7/2010 Req'd Qty: 4.00



Customer:

Reference:

Approvals: Process Plan: MF Date: 10-6-29

Tooling:

Date:

Run

Start



QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_

Date:

Stop



Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

IIN D350-727

Rev A

100



0.00

DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile and create labels per PPP D350-727-045 CHG001

*S.10/06/29*

*JJ for BG 10/06/29*

110



0.00

Pick Kit

Packaging

Memo

0.00

Packaging

*10-6-29 40 SF*

120



0.00

QC4- 100% Inspect kits for completeness

QC

Memo

0.00

Quality Control

*S.10/06/29*

*40*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

**Work Order ID 60242**

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Item ID: D350-727-045

Accept



Setup: Start



Revision ID:

Item Name: Wearplate, Full Length, LH/RH

Stop



Start Date: 6/30/2010 Start Qty: 4.00



Cust Item ID:

Required Date: 7/7/2010 Req'd Qty: 4.00



Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start



Stop

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130



Packaging

Packaging

0.00

Memo

0.00

Identify and pack for shipping as per PPP D350-727-045  
Location: 62 ☐ PPP Rev: B

Packaging

140



QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

*Run/Setup (4)*

*10/06/30*

*MF 10-6-30*

W/O:		WORK ORDER CHANGES							
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector		

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

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Work Order ID: 60242

Parent Item: D350-727-045

Parent Item Name: Wearplate, Full Length, LH/RH

Start Date: 6/30/2010

Required Date: 7/7/2010

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev: A 05.05.12 New issue KJ/JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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D3319-1

Manufactured No

120

Each

20.0000

1

4

Wearplate

Location

Loc Qty

Loc Code

ST497

20

56803

3

57710

17

D3319-3

Manufactured No

120

Each

8.0000

1

4

Wearplate

Location

Loc Qty

Loc Code

ST497

8

57711

8

10-6-29

10-6-29

4

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries